

STRESSFUL LIFE EVENTS

REVIEW

Name of Child: _____

Age: _____

Current Legal Custodian: _____

Current Living Arrangement: _____

If the child is not living with his/her natural parents, describe the circumstances leading to the change? _____

Is the Child in DSS Custody? _____

Date Entering DSS Custody: _____

Reason for DSS Custody: _____

Name/Phone of Protective Services Worker: _____

Circumstances leading to DSS Custody Order: _____

Does the child have a family history of Mental Illness? _____

Does the child have a family history of Substance Abuse? _____

Has the child ever been hospitalized for psychiatric reasons? _____

Has the child ever attempted to kill her/himself? _____

Has the child ever utilized mental health emergency services? _____

In the last year has the child :

- been subjected to substantiated neglect? _____
- lived in a home where another juvenile has died or been abused/neglected? _____
- been subject to substantiated physical abuse? _____
- been subject to substantiated sexual abuse? _____
- experienced significant violence towards him/herself? _____
- witnessed significant violence at home or in the community? _____
- lived in an environment injurious to his welfare? _____
- experienced the death of a loved one? _____
- been incarcerated or arrested? _____
- had a loved one be incarcerated or arrested? _____
- otherwise lost contact with a loved one? _____
- had multiple changes in school placement(>2)? _____
- experienced homelessness/inadequate housing? _____
- suffered from a serious physical illness? _____
- had a loved one suffer from a serious illness? _____
- significant change in family composition? _____
- loss of income source/job within the family? _____
- been expelled from school or placed on long term suspension? _____
- been placed in to a day treatment program, been placed on home-bound status by the local educational authority? _____
- been kicked out of multiple daycare or preschool situations (>1)? _____